

07-24-01

PTO/SB/05 (11-00)

Approved for use through 10/31/2002 OMB 0851-0032

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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

42390P11996

First Inventor

James A. McCall

Title

SYSTEMS HAVING MODULES WITH SELECTABLE ON DIE

Express Mail Label No.

EL034436925US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 202311. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.3. ☒ Specification [Total Pages 30]
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 16]

5. Oath or Declaration [Total Pages 4]

- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 18 completed)
- i. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b)
- c. ☒ Unsigned

6. ☐ Application Data Sheet. See 37 CFR 1.767. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- 9. ☐ Assignment Papers (cover sheet & document(s))
- 10. ☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
- 11. ☐ English Translation Document (if applicable)
- 12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS
Citations
- 13. ☐ Preliminary Amendment
- 14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- 15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
- 16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i).
Applicant must attach form PTO/SB/35 or its equivalent.
- 17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No:

Prior application Information: Examiner: Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

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or ☐ Correspondence address below

Name

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City

State

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Telephone

Fax

Name (Print/Type)

Donna Jo Coningsby

Registration No. (Attorney/Agent)

41,684

Signature

Date

07/23/01

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

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**FEE TRANSMITTAL
for FY 2000**

Patent fees are subject to annual revision

Complete if Known

| | |
|----------------------|-----------------|
| Application Number | |
| Filing Date | July 23, 2001 |
| First Named Inventor | James A. McCall |
| Examiner Name | |
| Group/Art Unit | |
| Attorney Docket No. | 42390P11996 |

| | | |
|--------------------------------|------|--------|
| TOTAL AMOUNT OF PAYMENT | (\$) | 988.00 |
|--------------------------------|------|--------|

METHOD OF PAYMENT (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to credit any overpayments to:

Deposit Account Number **02-2666**Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**☒ Charge Any Additional Fee(s) Required
Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20☐ Applicant claims small entity status
See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION (continued)****3. ADDITIONAL FEE**

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet. | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for response within first month | |
| 116 | 390 | 216 | 195 | Extension for response within second month | |
| 117 | 890 | 217 | 445 | Extension for response within third month | |
| 118 | 1,390 | 218 | 695 | Extension for response within fourth month | |
| 128 | 1,890 | 228 | 945 | Extension for response within fifth month | |
| 119 | 310 | 219 | 155 | Notice of Appeal | |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | |
| 121 | 270 | 221 | 135 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,240 | 241 | 620 | Petition to revive - unintentional | |
| 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | |
| 143 | 440 | 243 | 220 | Design issue fee | |
| 144 | 600 | 244 | 300 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 130 | 123 | 130 | Petitions related to provisional applications | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

Other fee (specify) _____

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 101 | 710 | 201 | 355 | Utility filing fee | 710.00 |
| 106 | 320 | 206 | 160 | Design filing fee | |
| 107 | 490 | 207 | 245 | Plant filing fee | |
| 108 | 710 | 208 | 355 | Reissue filing fee | |
| 114 | 150 | 214 | 75 | Provisional filing fee | |

SUBTOTAL (1)(\$) **710.00****2. EXTRA CLAIM FEES**

| Total Claims | | Extra Claims | | Fee from below | |
|--------------------|----------------|--------------|-------|----------------|----------|
| Independent Claims | 31 - 20** = 11 | X | 18.00 | = | \$198.00 |
| Multiple Dependent | 4 - 3** = 1 | X | 80.00 | = | \$80.00 |

**or number previously paid, if greater; For Reissues, see below

| Large Entity | | Small Entity | | Fee Description |
|--------------|----------|--------------|----------|---|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 80 | 202 | 40 | Independent claims in excess of 3 |
| 104 | 260 | 204 | 135 | Multiple Dependent claim, if not paid |
| 109 | 80 | 209 | 40 | **Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | **Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2)(\$) **278.00****SUBMITTED BY**Name (Print/Type) **Donna Jo Coningsby**Registration No.
(Attorney/Agent)**41,684**

Telephone

(503) 684-6200

Signature

Donna Jo Coningsby

Date

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